PATENT APPLICATION FEE DETERMINATION RECORD								Application or Docket Number				
Effective October 1, 2004									10/510602			
CLAIMS AS FILED - PART I								SMALL E	NTITY			
			(Column 1)			Column 2)	_	TYPE		OR		R THAN . ENTITY
то	TAL CLAIM	S						RATE .	FEE] .	RATE	FEE
FOR			NUMBER FILED NU			MBER EXTRA	1	BASIC FEE	555	OR	BASIC FEE	-
TOTAL CHARGEABLE CLAIMS			9 minus 20 = .			/	1	X\$9=		OR	X \$ 18 =	
INDEPENDENT CLAIMS			1	minus 3 = .		/	1	X \$ 44 =		OR	X \$ 88 =	
MUL	TIPLE DEPEN	IDENT CLAIM	RESENT ·					+ \$ 150 =		or	+ \$ 300 =	
* If the difference in column 1 is			less than zero, enter "0" in			column 2	J	TOTAL	555	OR	TOTAL	
CLAIMS AS AMENDED - PART II.												L
U	g. pr. up	(Column 1)		(Colu	mn 21	(Column 3)		SMALL	ENTITY	OR		R THAN ENTITY
		CLAIMS REMAINING		HIGH	EST		1 ·		ADDI-			ADDI
AMENDMENT A		AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	• 9	Minus	- /	<u> </u>	=		X\$9=		OR	X \$ 18 =	
	Independent	· '/	Minus	/	2	- 4		X \$ 44 =		OR	X \$ 88 =	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+\$300=	
							•	TOTAL ADDIT. FEE		OR I	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3) CLAMS HIGHEST						دستوست			ure out	عمك رويس ويع	areases, ve
윘		REMAINING AFTER AMENDMENT		NUME .PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$9=		OR	X \$ 18 =	
	Independent	•	Minus	***		=		X \$ 44 =		OR	X \$ 88 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+\$150=		OR	+ \$ 300 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colum		(Column 3)	, ,					
욻ㅏ		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE '	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Fotal .	•	Minus	**		=		X\$9=		OR	X \$ 18 =	
	ndependent	•	Minus	***		•		X \$ 44 =		OR	X \$ 88 =	
• Г	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =	·	OR	+ \$ 300 =	
					•	<u></u>	•	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
1	The "Highest Nu	mn 1 is less than t mber Previously P	aid For IN THIS S	SPACE is le	ss than '	20°, enter '20°,				•		
7	Tthe "Highest Nur The "Highest Nurr	mber Previously Pa ber Previously Pa	aid For IN THIS & id For (Total or to	SPACE is le idependent)	ss than ' is the hi	3', enter "3". ghest number for	und in	the appropriate	box in column	ı 1 .		

FORM PTO-875 (Rev. 11/2004)